

## Sonographer registration in the United Kingdom – a review of the current situation

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### Abstract

There is no statutory registration as a sonographer available in the United Kingdom (UK) and the titles of 'sonographer' and 'ultrasonographer' are not legally protected. The majority of sonographers are statutorily registered with the Health and Care Professions Council or Nursing and Midwifery Council as they have a professional background as a radiographer, clinical scientist, nurse, physiotherapist or midwife that allows this, but this registration is not as a sonographer. For otherwise well-qualified and experienced sonographers, statutory registration is impossible to achieve at the present time and they have no statutory regulatory home. This can lead to problems for the sonographers themselves, for the patients and public in terms of protection and for employers when selecting staff. This paper discusses the complex registration situation for sonographers in the UK and includes reference to the alternative voluntary registers and their possible accreditation by the Professional Standards Authority.

**Keywords:** Sonographer, regulation, ultrasound, registration

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### Introduction

There is a very wide range of healthcare professionals undertaking and reporting ultrasound examinations in the United Kingdom (UK), the majority of whom are registered with a statutory regulatory body such as the General Medical Council (GMC), Health and Care Professions Council (HCPC) or Nursing and Midwifery Council (NMC). However, it is not possible for all sonographers to obtain statutory registration. This paper discusses the current situation with respect to the registration of sonographers in the United Kingdom. For the purposes of this paper the following definition of 'sonographer', taken from the Public Voluntary Register of Sonographers,<sup>1</sup> is used and this discussion does not extend to the position of doctors registered with the GMC.

*'A healthcare professional who undertakes and reports on diagnostic, screening or interventional ultrasound examinations. They will hold qualifications equivalent to a postgraduate certificate or diploma in medical ultrasound that has been accredited by the Consortium for the Accreditation of Sonographic Education (CASE). They are either not medically qualified or hold medical qualifications but are not statutorily registered as a doctor in the UK.'*

Registration is the process by which healthcare professionals are admitted to the relevant register for their profession by providing information about themselves in accordance with the registration authority's

published requirements. Registration authorities set standards for their registrants' practice, conduct, education and training and monitor adherence to these via regulatory processes. Regulation usually includes a range of disciplinary procedures that are applied when a registrant or employee is found to have breached the set standards in some way.<sup>2</sup>

For those sonographers who are statutorily registered with the HCPC or NMC, registration is usually as a radiographer, clinical scientist, physiotherapist (HCPC) or as a midwife or nurse (NMC); registration is not as a sonographer. There is no legal requirement for a sonographer to be registered with a statutory regulatory body and 'sonographer' and 'ultrasonographer' are not legally protected titles. There are a sizeable number of sonographers who have no statutory regulatory home as their professional background is such that they cannot register with the HCPC or NMC. This includes those sonographers whose original professional education and training was not within the allied health, clinical science, nursing and midwifery categories of healthcare professional identified above, or who trained as sonographers overseas.

### Professional body vs statutory regulatory body

There is often confusion between a professional body and a statutory regulatory body. The College of Radiographers (CoR) and the Royal College of Midwives (RCM) for

example are professional bodies and not statutory regulators. The British Medical Ultrasound Society (BMUS) is a Scientific Organisation. Examples of statutory regulatory bodies are the Health and Care Professions Council (HCPC), the Nursing and Midwifery Council (NMC) and the General Medical Council (GMC). These statutory regulators provide statutory registration for their registrants and, in the UK, this places legal restraints on the registrant, so 'radiographer' is a legally protected title and registration with the HCPC is required to practise in the UK.

### Requirements for statutory registration

Sonographers cannot be registered with the HCPC or NMC unless they meet the standards for one of the professions those bodies regulate. This particularly affects sonographers who trained overseas or entered sonography training in the UK as a graduate in a discipline other than those leading to a registrable qualification; such sonographers may be very well qualified and competent but unable to gain statutory registration. Sonographers from the European Union/European Economic Area (EU/EEA) or Switzerland may be able to register as a temporary registrant using the title recognised in their own country, provided they are established in a profession regulated by a statutory regulator. However, such temporary registration will not be as a sonographer, as no EU/EEA country regulates sonographers, and the title is not protected in the UK.<sup>3</sup> This is consequent on EU legislation affecting the movement of professionals.<sup>4</sup> Sonographers from outside the EU/EEA may be able to statutorily register as a radiographer (for example) but this will depend on their primary qualifications, and assessment by the HCPC (in the case of radiographers) using their international application procedures.<sup>5</sup>

There are legal restrictions to the practice of those sonographers in the UK who are not statutorily registered, although for the majority of sonography posts it is not expected that these will present a problem; the legal restrictions are as follows:

- (1) They cannot act under Patient Group Directions (PGDs) for the administration of drugs and medicines, or train to become Supplementary Prescribers. They may act under Patient Specific Directions (PSDs), but those requiring them to act under these directions must ensure they are competent to do so safely.<sup>6</sup>
- (2) They cannot act as a referrer for clinical imaging examinations involving the use of ionising radiation.<sup>7</sup>

### The bid for statutory regulation of sonographers, and current government policy

In 2008, the College of Radiographers made an application to the then Health Professions Council (HPC) for sonography to become a regulated profession and 'sonographer' and 'ultrasonographer' to become protected titles. This application was made with the support of the United

Kingdom Association of Sonographers (UKAS) which later merged with the College of Radiographers in January 2009. Statutory regulation was subsequently recommended to the Secretary of State for Health by the HPC in October 2009. However, following the publication of a Command Paper by the Coalition Government in February 2011, this recommendation is unlikely to be taken forward by the Department of Health. The Government makes it clear in the paper that it does not wish to bring any of the aspirant groups (this includes sonographers/ultrasonographers) into statutory regulation. Instead, it would encourage the development of assured (accredited) voluntary registers. The Government does not completely rule out statutory registration, but this must be based on a solid body of evidence demonstrating a level of risk to the public that warrants the costs imposed by that regulation.<sup>8</sup>

### Renewal of registration

Sonographers who are statutorily registered due to their initial qualifications must renew their registration periodically and must provide evidence of continuing professional development (CPD). As sonography is not itself a regulated profession, it is often questioned whether there is a requirement to renew and so maintain statutorily regulated status. The CoR advice is that if it is possible to retain statutory registration then this should be done. This will help to protect patients and public, avoid problems when applying for or changing jobs, and avoid restrictions outlined above on the use of Patient Group Directions and referral for examinations involving ionising radiation. If individuals allow their statutory registration to lapse, they will have to follow the regulatory body's requirements to be re-admitted to the register should they wish to do so, or should they be required to do so in the future. The HCPC recognises that a healthcare professional's practice will change as his/her career develops and as long as the registrant is not acting outside of his/her area of current competence, that is allowed for.<sup>9</sup>

Some midwives have found themselves unable to re-register with the NMC when working full time in obstetric ultrasound. They are required to complete an Intention to Practice form and have this countersigned by a local Supervisor of Midwives. Obstetric ultrasound is not always recognized as being part of a midwife's role.<sup>10</sup>

### Professional indemnity insurance

From early 2014, it will be a legal requirement for all statutorily registered healthcare professionals to have suitable professional indemnity insurance (PII) in place.<sup>11</sup> Registrants will be required to confirm this when they apply to renew their registration. For those registered as radiographers with the HCPC, this was originally due to be applied at the February 2014 renewal, but this has been delayed as the legislation is unlikely to be completed in time. The onus will be on individuals to confirm they have PII in place and inaccurate responses will potentially have serious consequences, including possible loss

of registration. The minimum required level of PII should be provided by the employer, as they hold vicarious liability for their employees, but membership of a professional body will often provide additional cover as a benefit of membership. Many sonographers work independently and do not have an employer. They will need to ensure that they can confirm that they have PII cover in place when renewing their statutory registration.

It is essential for sonographers to be entirely clear on whether they are employees or not, as this will affect their position with respect to vicarious liability. The various statutory regulators have information on the legislation relating to PII and renewal of registration requirements on their websites.<sup>11</sup> Professional bodies such as the CoR and RCM will also be advising their members on how the new legislation will affect them and members should check with their own professional body as to any membership benefits related to PII.

### Voluntary registers

For those sonographers who cannot obtain statutory registration and/or wish to support the attempts to achieve this, there is the option of applying to join a voluntary register. Voluntary registers of particular relevance to sonographers are the Public Voluntary Register of Sonographers, administered by the College of Radiographers,<sup>1</sup> and for clinical physiologists/sonographers undertaking echocardiograms, the voluntary register run by the Registration Council for Clinical Physiologists (RCCP).<sup>12</sup>

For some groups of healthcare professionals (e.g. clinical physiologists) there are agreements with the Department of Health that those who cannot obtain statutory registration are expected to be on a voluntary register.<sup>13</sup> However, by their nature, voluntary registers do not have the legal authority of a statutory register and cannot protect patients and the public in the way that a statutory register is able to. There is no legal compulsion to join the register, and if a complaint is made about a healthcare professional not on the register, the organisation running it has limited ability to take any action. It does not have the legal powers to demand the disclosure of information and it may be difficult for it to impose a single nationwide set of education and training standards on the workforce. There is also no mechanism for referral from the courts or police following a criminal conviction or caution. The management of complaints against voluntary registrants and associated investigation and disciplinary procedures can be expensive for what are often small organisations, with relatively few voluntary registrants to cover the costs of running the register. For example, the PVRs has fewer than 1000 registrants which contrasts markedly with the HCPC register with well in excess of 300,000 registrants. Legal challenges to decisions against voluntary registrants can and do occur, and costs can escalate quickly.

Organisations such as the CoR and RCCP will continue to argue for and support statutory registration for sonographers/clinical physiologists as that provides greater protection for patients and the public than voluntary registration.<sup>14,15</sup>

### Accreditation

Accreditation is the formal recognition of competence to perform specific tasks or procedures and is distinct from registration. Accreditation can apply to individuals, departments<sup>16</sup> ultrasound courses<sup>17</sup> and voluntary registers themselves.<sup>18</sup> Several professional bodies accredit individuals who have completed a specified course of education and training and/or can provide evidence of the required experience (Appendix 1). Their names will then appear on a list of accredited members. Examples include the Society for Vascular Technology of Great Britain and Ireland (SVT) and the British Society of Echocardiography (BSE). The CoR also has an accreditation scheme under which sonographers may apply to become accredited as advanced or consultant practitioners.<sup>19</sup>

### Accredited (assured) voluntary registers

Consequent upon the Coalition Government's Command Paper<sup>8</sup> relating to the regulation of healthcare workers, the Professional Standards Authority (PSA) gained powers to accredit the voluntary registers of professionals working in a variety of health and social care professions.<sup>18</sup> The rationale for this is to provide assurance to the public that an accredited (assured) voluntary register is well run and that their registrants are expected to meet high standards. The PSA (formerly the Council for Healthcare Regulatory Excellence) is the sector 'super-regulator' and scrutinises and oversees the work of the nine statutory healthcare regulators.

The PSA's voluntary register accreditation scheme commenced in January 2013. Those seeking to gain accreditation for their voluntary registers must follow a detailed and comprehensive application process and demonstrate fully that the voluntary register under consideration meets the high standards set by the PSA. Individual organisations responsible for voluntary registers will need to decide whether to apply for accreditation with the PSA after evaluating the costs and resources required to achieve this.

### Academy for Healthcare Science

The Academy for Healthcare Science (AHCS) is developing an 'equivalence' assessment process for those within the healthcare science workforce who have undertaken training, hold qualifications and/or considerable professional experience and who wish to show that these are equivalent to the relevant Modernising Scientific Careers (MSC) programme.<sup>20</sup> Assessment is conducted on a case by case basis. Gaining a Certificate of Equivalence can lead to eventual registration with the HCPC as a Clinical Scientist. A small number of sonographers who are not eligible for statutory registration at present may be able to obtain statutory registration via this route and those interested in exploring this further are advised to visit the AHCS website and contact them for further information.

## Discussion

The current system for regulating healthcare workers (when this is possible) does provide an important safeguard, but there are limitations on its effectiveness because it is too distant from where risk occurs to enable it to act proactively and preventively in all situations.<sup>8</sup>

The General Medical Council (GMC) has previously described a “four layer” model of regulation for practitioners who work in an employed environment as part of wider clinical teams. The first layer is the individual practitioner and their commitment to a common set of ethics, values and principles which put patients first. Next is team-based regulation which reflects the importance of acting if a colleague’s conduct or performance is putting patients at risk. After that comes workplace regulation which reflects the responsibilities of NHS and other healthcare providers and finally, the regulators, through work on standards, education, registration and fitness to practise.<sup>21</sup>

Registration (whether statutory or voluntary) has an important function in the above model, with respect to the delivery of ultrasound services, by ensuring that standards of education, training and conduct of the healthcare professionals concerned are upheld and maintained.

As part of their staff selection processes, employers must ensure that applicants are qualified to undertake the duties expected of them. Many employers ask for evidence of statutory registration and will check the relevant statutory register to see if the applicant is registered and whether there are any annotations relating to practice requirements or restrictions. Some employers will insist on statutory registration for their sonographers, whereas others will recognise that applicants may be very well qualified but, through no fault of their own, cannot become statutorily registered. There is not always consistency within a single organisation, as statutory registration may be required by an employer for some parts of the ultrasound service it delivers but not for others.

Statutory or voluntary registration does not in itself guarantee competence, but does mean that the registrant has met certain requirements, including evidence of appropriate education and training in order to be admitted to the register. Registration is effectively a declaration by an individual that he/she is fit to practice and, provided that the regulator has no reason to suspect otherwise, is able to be admitted to the register. At that point, the individual is obligated to comply with the regulator’s rules and requirements, one of which is to re-declare at given intervals that he/she remains fit to practice and can provide evidence of (for example) continuing professional development. Registration also allows for a search to be made of an individual’s registration status and whether any practice requirements or restrictions have been applied. There is also a formal procedure that allows for complaints about statutory registrants to be made and investigated that operates within a framework founded upon primary legislation passed by Parliament. Although voluntary registers have complaints procedures associated with them, they do not have the legally enshrined authority or powers of a statutory regulator.

In the absence of statutory registration for sonographers, the CoR supports employers considering and employing applicants for sonography posts, who are unable to gain statutory registration but are otherwise well qualified.<sup>22</sup> The applicant may already be on an appropriate voluntary register or can be asked to apply for voluntary registration although the nature of this means that it cannot always be insisted upon. Clearly, the normal checks that an employer must make on the background and likely competence of any employee need to be made before any offer of employment. The comparative education and training standard an employer should use is a UK Postgraduate Certificate or Diploma in Medical Ultrasound in the relevant ultrasound specialism(s) that has been accredited by the Consortium for the Accreditation of Sonographic Education (CASE). There is, however, no simple way to compare ultrasound qualifications from courses delivered outside or within the UK that are not CASE accredited and applicants will need to be assessed on their merits. UK Naric<sup>23</sup> can provide a formal comparison of academic level, but obtaining comparative information on the clinical component of ultrasound courses, that are not accredited by CASE and may have been delivered overseas, is more problematic.

## Conclusion

Sonographer registration is a surprisingly complex field; there is much fragmentation and often confusion results. Regardless of how well qualified sonographers may be, statutory registration is not currently achievable for all. Although it is not in itself a guarantee of competence, registration and its associated regulatory processes help provide protection for patients and the public. Lack of statutory registration can lead to difficulties for sonographers when initially applying for a post or moving on, even at a time of severe sonographer shortage. Employers welcome the ability to check a central register and have confidence in the statutory and voluntary regulators. Professional bodies and organisations will continue to argue and support the case for statutory registration for sonographers, the recognition of the profession and the titles of ‘sonographer’ and ‘ultrasonographer.’

## DECLARATIONS

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## Appendix 1

### Abbreviations used within the text

#### Professional bodies

British Society of Echocardiography (BSE)  
 College of Radiographers (CoR)  
 Royal College of Midwives (RCM)  
 Society for Vascular Technology of Great Britain and Ireland (SVT)

#### Scientific Organisations

British Medical Ultrasound Society (BMUS)

#### Statutory Regulators

General Medical Council (GMC)  
 Health and Care Professions Council (HCPC)  
 Nursing and Midwifery Council (NMC)

#### Voluntary Registers

Public Voluntary Register of Sonographers (PVRs)  
 Registration Council for Clinical Physiologists (RCCP)

#### Other

Academy of Healthcare Science (AHCS)  
 Consortium for the Accreditation of Sonographic Education (CASE)  
 Health Professions Council (HPC). (Became the HCPC on 1 August 2012)  
 Professional Standards Authority (PSA)  
 United Kingdom Association of Sonographers (UKAS)  
 (Merged with the CoR on 1 January 2009)